


REISSUE PATENT APPLICATION TRANSMITTAL													
Address to: MS Reissue Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Attorney Docket No.</td> <td>DRIZZO 3.0-001 RE</td> </tr> <tr> <td>First Named Inventor</td> <td>RIZZO</td> </tr> <tr> <td>Original Patent Number</td> <td>6,470,338</td> </tr> <tr> <td>Original Patent Issue Date (Month/Day/Year)</td> <td>October 22, 2002</td> </tr> <tr> <td>Express Mail Label</td> <td>EV342574357US</td> </tr> </table>		Attorney Docket No.	DRIZZO 3.0-001 RE	First Named Inventor	RIZZO	Original Patent Number	6,470,338	Original Patent Issue Date (Month/Day/Year)	October 22, 2002	Express Mail Label	EV342574357US
Attorney Docket No.	DRIZZO 3.0-001 RE												
First Named Inventor	RIZZO												
Original Patent Number	6,470,338												
Original Patent Issue Date (Month/Day/Year)	October 22, 2002												
Express Mail Label	EV342574357US												
APPLICATION FOR REISSUE OF: <input checked="" type="checkbox"/> Utility Patent <input type="checkbox"/> Design Patent													
APPLICATION ELEMENTS (37 CFR 1.173)		ACCOMPANYING APPLICATION PARTS											
1. <input checked="" type="checkbox"/> Fee Transmittal Form (PTO/SB/56) <i>(Submit an original, and a duplicate for fee processing)</i> 2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification and Claims in double column copy of patent format <i>(amended, if appropriate)</i> 4. <input checked="" type="checkbox"/> Drawing(s) <i>(proposed amendments, if appropriate)</i> 5. <input checked="" type="checkbox"/> Reissue Oath/Declaration (original or copy) <i>(37 CFR § 1.175)(PTO/SB/51 or 52)</i> 6. <input checked="" type="checkbox"/> Power of Attorney 7. Original U.S. Patent currently assigned? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If Yes, check applicable box(es))</i> <input checked="" type="checkbox"/> Written Consent of all Assignees (PTO/SB/53) <input type="checkbox"/> 37 CFR 3.73(b) Statement (PTO/SB/96) 8. <input type="checkbox"/> CD-ROM or CD-R in duplicate, Computer Program (Appendix) or large table 9. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all of the following are necessary)</i> a. <input type="checkbox"/> Computer Readable Form (CFR) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM (2 copies) or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies		10. <input checked="" type="checkbox"/> Statement of status/support for all changes to the claims. See 37 CFR 1.173(c). 11. <input type="checkbox"/> Original U.S. Patent for surrender <input type="checkbox"/> Ribbioned Original Patent Grant <input type="checkbox"/> Statement of Loss (PTO/SB/55) 12. <input type="checkbox"/> Foreign Priority Claim (35 U.S.C. 119) <i>(if applicable)</i> 13. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 14. <input type="checkbox"/> English Translation of Reissue Oath/Declaration <i>(if applicable)</i> 15. <input checked="" type="checkbox"/> Preliminary Amendment 16. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 17. Other: <div style="border: 1px solid black; height: 40px; width: 100%;"></div>											
18. CORRESPONDENCE ADDRESS													
<input checked="" type="checkbox"/> Customer Number or Bar Code Label		<div style="text-align: center;">  * 0 0 0 5 3 0 * </div>											
<input type="checkbox"/> Correspondence address below													
Name													
Address													
City													
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Zip Code													
Country													
Telephone													
Fax													
Name (Print/Type) John P. Maldjian		Registration No. (Attorney/Agent) 41,967											
Signature <i>John P. Maldjian</i>		Date August 21, 2003											

The PTO did not receive the following listed items: *specification and drawing*

08/21/03

Approved for use through 04/30/2003. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Effective 01/01/2003. Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT	(\$)	534.00
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Complete if Known

Application Number	
Filing Date	
First Named Inventor	Rizzo
Examiner Name	Not Yet Assigned
Art Unit	N/A
Attorney Docket No.	DRIZZO 3.0-001RE

METHOD OF PAYMENT (check all that apply)

<input type="checkbox"/>	Check	<input type="checkbox"/>	Credit Card	<input type="checkbox"/>	Money Order	<input type="checkbox"/>	Other	<input type="checkbox"/>	None
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x	Deposit Account
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12-1095

Lerner, David, Littenberg,
Krumholz & Mentlik, LLP

The Director is hereby authorized to: (check all that apply)

<input checked="" type="checkbox"/>	Charge fee(s) indicated below	<input checked="" type="checkbox"/>	Credit any overpayments
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☒ Charge any additional fee(s) during the pendency of this application

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	750	2001	375	Utility filing fee	
1002	330	2002	165	Design filing fee	
1003	520	2003	260	Plant filing fee	
1004	750	2004	375	Reissue filing fee	375.00
1005	160	2005	80	Provisional filing fee	

SUBTOTAL (1)	(\$)	375.00
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2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

			Extra Claims		Fee from below		Fee Paid
Total Claims	34	**-	13	x	9	=	117.00
Independent Claims	4	**-	1	x	42	=	42.00
Multiple Dependent						=	

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	18	2202	9	Claims in excess of 20
1201	84	2201	42	Independent claims in excess of 3
1203	280	2203	140	Multiple dependent claim, if not paid
1204	84	2204	42	** Reissue independent claims over original patent
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2)	(\$)	159.00
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****or number previously paid, if greater; For Reissues, see above**

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity
<p>1. Revenue Recognition</p> <p>Large entities use the percentage of completion method for long-term contracts, recognizing revenue as work progresses. Small entities often use the cost of sales method, recognizing revenue only when the contract is completed.</p>	<p>1. Revenue Recognition</p> <p>Small entities often use the cost of sales method for long-term contracts, recognizing revenue only when the contract is completed.</p>
<p>2. Inventory Valuation</p> <p>Large entities use the FIFO (First In, First Out) method for inventory valuation. Small entities often use the LIFO (Last In, First Out) method.</p>	<p>2. Inventory Valuation</p> <p>Small entities often use the LIFO (Last In, First Out) method for inventory valuation.</p>
<p>3. Depreciation</p> <p>Large entities use the MACRS (Modified Accelerated Cost Recovery System) for depreciation. Small entities often use the straight-line method.</p>	<p>3. Depreciation</p> <p>Small entities often use the straight-line method for depreciation.</p>
<p>4. Bad Debt Expense</p> <p>Large entities use the allowance method for bad debt expense. Small entities often use the direct write-off method.</p>	<p>4. Bad Debt Expense</p> <p>Small entities often use the direct write-off method for bad debt expense.</p>
<p>5. Lease Accounting</p> <p>Large entities use the ASC 842 (Leases) standard for lease accounting. Small entities often use the ASC 840 (Leases) standard.</p>	<p>5. Lease Accounting</p> <p>Small entities often use the ASC 840 (Leases) standard for lease accounting.</p>

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge – late filing fee or oath	
1052	50	2052	25	Surcharge – late provisional filing fee or cover sheet.	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for <i>ex parte</i> reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	410	2252	205	Extension for reply within second month	
1253	930	2253	465	Extension for reply within third month	
1254	1,450	2254	725	Extension for reply within fourth month	
1255	1,970	2255	985	Extension for reply within fifth month	
1401	320	2401	160	Notice of Appeal	
1402	320	2402	160	Filing a brief in support of an appeal	
1403	280	2403	140	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive – unavoidable	
1453	1,300	2453	650	Petition to revive - unintentional	
1501	1,300	2501	650	Utility issue fee (or reissue)	
1502	470	2502	235	Design issue fee	
1503	630	2503	315	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	750	2809	375	Filing a submission after final rejection (37 CFR 1.129(a))	
1810	750	2810	375	For each additional invention to be examined (37CFR 1.129(b))	
1801	750	2801	375	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)	(\$)	0.00
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SUBMITTED BY

Name (Print/Type)	John P. Maldjian
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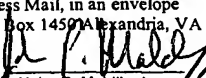
Registration No. (Attorney/Agent)	41,967
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Complete (if applicable)

Telephone	(908) 518-6386
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Signature

Date	August 21, 2003
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I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as Express Mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450 Alexandria, VA 22313-1450, on the date shown below.
Dated: 8/21/03 Signature: 
(John P. Maldjian)

Docket No.: DRIZZO 3.0-001RE
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Reissue Patent Application of: Rizzo, et al.

Reissue of
Application No.: 09/611,856

Group Art Unit: 2172

Filed: July 7, 2000

Examiner: Shah, Hanjiv

For: A Computerized System And Method For
Assisting Potential Clients to Identify An
Appropriate Provider for Professional Services

CONSENT OF ASSIGNEE PURSUANT TO 37 C.F.R. § 1.172(a)

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Pursuant to 37 C.F.R. § 1.172(a), I, David Rizzo, being an officer of LAWYERSHOMEPAGENETWORK, INC., the Assignee of the captioned patent application by way of assignment (reel/frame 010928/0270), hereby consent to the above-captioned Request For Reissue in the above-identified patent application.

LAWYERSHOMEPAGENETWORK, INC.

By: 

David Rizzo
President

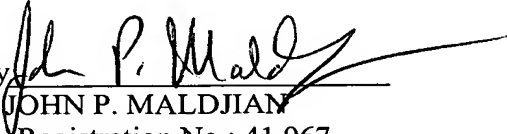
Dated: 8-13-03.

Reissue of
Application No. 09/611,856

Docket No.: DRIZZO 3.0-001 RE

LAWYERSHOMEPAGENETWORK, INC., Assignee of U.S. Patent No. 6,470,338, consents to the filing of the present application for the reissue of U.S. Patent No. 6,470,338.

Respectfully submitted,

By 
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Registration No.: 41,967
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Westfield, New Jersey 07090

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Attorneys for Applicant